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	Application Number	09/745.157		
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FORM	First Named Inventor	Jeffrey A. Korn	EIVED	
	Art Unit	2633	CENTRAL	FAX CENT
(to be used for all correspondence after initial filling	Examiner Name	Phan, Hanh	OCT	0 5 2005
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Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account, Number, 501647 Deposit Account, Name; Assun Technologies, Inc. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee remainded and under 37 CFR 1.15 and 1.17 WARNING: Information and under 37 CFR 1.52(e), the application is fee (s) V Credit any overpayments Charge fee(s) indicated below, except for the filling fee of the content of the content of the fee (s) V Credit any overpayments under 37 CFR 1.152(e). It is and 1.17 WARNING: Information and under 37 CFR 1.152(e). It is and 1.17 WARNING: Information and under 37 CFR 1.52(e). It is and 1.17 WARNING: Information and under 37 CFR 1.52(e). It is and 1.17 WARNING: Information and under 37 CFR 1.52(e). It is application for reply within 3rd month Deposit Account Number of Including Survey of the second of the	TOTAL AMOUNT	OF PAYMENT	(\$) 60)	Attorney Dock	et No.	1006.01-L	JS			
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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below	Deposit Acc	ount Deposit Acc	ount Number: <u>501</u>	547	Deposit A	Account N	eme: Axsur	n Techr	nologies, Inc.		
Charge any additional fee(s) or underpayments of fee(s) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SIMBLE BRIEFITY Application Type Fee (s)	For the abo	ve-identified depo	sit account, the D	irector is he							
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		The (Print/Type) J Grant Houston					Date October 5, 2005				

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